

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

(Through number) Labeled

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BEST AVAILABLE COPY

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If more than 150 claims or 10 actions
staple additional sheet here

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